File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073





FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

2008 MAY 30 PM 12: 48

COMMITTEE NAME (Must be same as on Statement of Or	ganization)			
COMMITTEE TO ELECT WES WHITEAD	•	ÌГ	FORM	
IMPORTANT: Indicate by # type of committee you are reporting fo (1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Car Subdivision Candidate (8)County PAC (9)City PAC (10)School 11) Local Ballot Issue	(2)State PAC (3)State Party	(E	DR-2 Rev. 07/2007) or Office Use Ontomm. #	111126
CANDIDATE COMMITTEES ONLY:		_		
Candidate Name MR. WES WHITEAD	Political Party (if applicable)			
	DEMOCRAT			
Office Sought LEGISLATOR	District (if Senate or House) IA HOUSE DIST. 1			
Late reports are subject to possible civil and criminal penalties. F	Pursuant to Iowa Code sections 68B.32A(7) (72)255 - 5074 TELEPHONE		A.401(3), the cal	
Country			-	
I AM PILING A 5/19/08	REPORT FOR (1) ELECTION /(2)NON-I	ELECTION YEA	AR.
(report date)	Indicate by #	1		
\square CHECK IF AMENDMENT TO REPORT DATED $\frac{5/15/08}{}$		ocal Com	mittees, enter Dat	e of Election
☐ Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file	M /		ocal Committees, ion is held	enter County in
STATEMENT OF CASH ON HAN	ID			
CASH ON HAND at the beginning of the reporting period. (T committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	cash on hand at the end	\$	6,894.00	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sche	dule A) (*also see in-kind below)		325.00	
Schedule F: Loans Received total (Attach Schedul			0.00	
Schedule H: Total Sales of Campaign Property (At			0.00	
(Schedule H applies to Candidates' Con				
	SUB-TOTAL	\$	7,219.00	
SUBTRACT TOTAL MONEY SPENT THIS PERIO	D	·		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		4,584.33	
Schedule F: Loan Repayments total (Attach Sched	•		0.00	•
CASH ON HAND at the end of this reporting period (if final re			2,634.67	
*UNPAID BILLS (From Schedule D - Attach Schedule D)			0.00	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche			5,507.76	
*OUTSTANDING LOANS (From Schedule F - Attach Sched	uie +)	\$	0.00	
CONSULTANT BREAKDOWN (Schedule G Attached?)			_YES <u></u> ✓	10
CANDIDATE COMMITTEES ONLY:			0.00	
/ALUE OF CAMPAIGN PROPERTY (From Schedule H - Att	,	\$		·
STATE COMMITTEES: Submit a reconciled campaign according	unt bank statement in January of each y	ear.		

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT WES WHITEAD

SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/8/08	ID# CK# ₈₉₄₉	STEVEN M. CUMMINGS 23468 NORTHFIELD RD. MEDIAPOLIS, IA 52637		\$200.00	INCOME
1/8/08	1D# 6078 CK# 1709	IOWA PHYSICAL THERAPY PAC 8355 UNIVERSITY BLVD., SUITE K CLIVE, IA 50325		25.00	
5/8/08	CK# 13255	AL STURGEON 507 7TH STREET, SUITE 540 SIOUX CITY, IA 51101		100.00	
	CK#				
	ID# CK#				
W 4	ID# CK#				
70-00-	ID# CK#				
The last of the la	ID# CK#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	\$ 325.00	

TOTAL (if last page of this schedule)

Page ____ of ____ (for Schedule A)

325.00

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE

B MONETARY
(Rev. 07/03) EXPENDITURES

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT WES WHITEAD

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/14/08	ID# CK#1126	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	MATERIALS FOR CAMPAIGN MAILING AND FINANCE CHARGES	\$ 261.91
1/28/08	ID# CK# ₁₂₀₁	STATE OF IOWA	CIVIL PENALTY FOR LATE FILING	50.00
2/28/08	ID# CK# 1107	IOWA DEMOCRATIC PARTY 5661 FLEUR DRIVE DES MOINES, IA 50321	TRUMAN FUND	3,000.00
2/27/08	ID# CK# ₁₁₀₈	IOWA DEMOCRATIC PARTY 5661 FLEUR DRIVE DES MOINES, IA 50321	VAN (VOTER ACTIVATION NETWORK) FEE	1,000.00
4/3/08	ID# CK# ₁₁₂₇	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	500 CAMPAIGN NEWSLETTERS	177.02
4/3/08	ID# CK#1128	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	1,000 CAMPAIGN POSTCARDS	95.40
	ID#			
	CK#			
	ID#			
	CK#			
	<u> </u>		CUD TOTAL	<u> </u>

SUB-TOTAL

\$ 4,584.33

TOTAL (if last page of this schedule)

\$ 4,584.33

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	1	of	1
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FOR INSTRUCTIONS.	SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT WES WHITEAD

SCHEDULE E	IN-KIND
(Rev. 06/97)	CONTRIBUTIONS
	CTHIS BOX IF

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
1/21-22/08	IOWA HOUSE TRUMAN FUND 5661 FLEUR DRIVE DES MOINES, IA 50321		CONSTITUENT SURVEY & POSTAGE	\$ 1,932.94	CONTRIBUTION
2/11-12/08	IOWA HOUSE TRUMAN FUND 5661 FLEUR DRIVE DES MOINES, IA 50321		INVITATION TO A FORUM & POSTAGE	1,787.38	
4/17/08	IOWA HOUSE TRUMAN FUND 5661 FLEUR DRIVE DES MOINES, IA 50321		LEGISLATIVE UPDATE & POSTAGE	1,787.44	
		\$ 5,507.76			
		TOTAL (if last page of this schedule)	\$ 5,507.76		

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)

File with: File With: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Reset Form



FOR INSTRUCTIONS, SEE BACK OF FORM

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	DISCLUSURE	SUMMART PAGE	Zuud mai	115 AM 11: 26
COMMITTEE NAME (Must be s	ame as on Statement of Org	anization)		
COMMITTEE TO ELECT W	ES WHITEAD			FORM
IMPORTANT: Indicate by # type of (1) Statewide/Legislative/Judge Sta (4) County Central Committee (5) C Subdivision Candidate (8) County F 11) Local Ballot Issue	nding for Retention Candidate(County Candidate(6)City Cand		R C (Fo	DR-2 ev. 07/2007) DISCLOSURE REPORT r Office Use Orily
CANDIDATE COMMITTEES OF	JI Y∙			mm. #.
Candidate Name MR. WES WHITEAD	· · · · · · · · · · · · · · · · · · ·	Political Party (if applicable) DEMOCRAT	Sc	anned WKS
Office Sought LEGISLATOR		District (if Senate or House) IA HOUSE DIST. 1		dited 3 pags
Late reports are subject to pessible		ursuant to lowa Code sections 68B.32 (タ12)255 - 809 Ч TELEPHONE	A(7) and 68A	A.401(3), the candidate, for a
SIGNATURE OF PERSON FILIN	G REPORT	TELEPHONE		DATE SIGNED
AM FILING A 5/19/08		REPORT FOR (1) ELECTION	! //2\NON_E	I ECTION YEAR
	rt date)	Indicate by		LECTION TEAR.
CHECK IF AMENDMENT TO	•	•		
JOHEON II AMENDINENT TO	KEPOKI DATED		Local Comn	nittees, enter Date of Election
Check if this is final (termination (You must continue to fi	on) report and attach Notice (le reports until a DR-3 is filed		County & Lo which Electi	ocal Committees, enter County in on is held
STATEME	NT OF CASH ON HAN	D		
	it MUST be the same as the		\$	6,894.00
ADD TOTAL MONEY T	AKEN IN THIS PERIOD			
Schedule A: Cash Con	tributions total (Attach Sched	lule A) (*also see in-kind below)	•••••	325.00
Schedule F: Loans Red	eived total (Attach Schedule	F)		0.00
Schedule H: Total Sale	s of Campaign Property (Atta	ach Schedule H)		0.00
(Schedule H a	pplies to Candidates' Com	mittees Only) SUB-TOTAL	\$	7,219.00
SUBTRACT TOTAL MO	ONEY SPENT THIS PERIOD)		4.504.22
Schedule B: Expenditu	res total (Attach Schedule B)	(**also see debts and loans below)		4,584.33
Schedule F: Loan Repa	syments total (Attach Schedu	ıle F)		0.00
CASH ON HAND at the end of th	is reporting period (if final re	oort balance must be zero)	\$	2,634.67
*UNPAID BILLS (From Schedul	e D - Attach Schedule D)		\$	0.00
IN KIND CONTRIBUTIONS (Fro	m Schedule E - Attach Sche	dule E)	\$	0.00
		ıle F)		0.00
ONSULTANT BREAKDOWN (•	YES ✓ NO
CANDIDATE COMMITTEES ON	•			
/ALUE OF CAMPAIGN PROPE		ach Schedule H)	\$	0.00
STATE COMMITTEES. College		ant bank statement in January of each		

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT WES WHITEAD

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/8/08	ID# CK# ₈₉₄₉	STEVEN M. CUMMINGS 23468 NORTHFIELD RD. MEDIAPOLIS, IA 52637		\$200.00	INCOME
1/8/08	1D# 6078 CK# 1709	IOWA PHYSICAL THERAPY PAC 8355 UNIVERSITY BLVD., SUITE K CLIVE, IA 50325		25.00	
5/8/08	ID# CK# 13255	AL STURGEON 507 7TH STREET, SUITE 540 SIOUX CITY, IA 51101		100.00	
	CK#				
	ID# CK#			4.1	
	ID# CK#				
			SUB-TOTAL	325.00	

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Page 1 of 1 (for Schedule A)

325.00

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

T
Reset Form
2

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE					
В	MONETARY				
(Rev. 07/03)	EXPENDITURES				
CHECK THIS BOX IF AMENDING FORM					

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT WES WHITEAD

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/14/08	ID# CK#1126	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	MATERIALS FOR CAMPAIGN MAILING AND FINANCE CHARGES	\$ ^{261.91}
1/28/08	ID# CK# ₁₂₀₁	STATE OF IOWA	CIVIL PENALTY FOR LATE FILING	50.00
2/28/08	ID# 9098 CK#1107	IOWA DEMOCRATIC PARTY 5661 FLEUR DRIVE DES MOINES, IA 50321	VE	
2/27/08	ID# 9098 CK# ₁₁₀₈	IOWA DEMOCRATIC PARTY 5661 FLEUR DRIVE DES MOINES, IA 50321	VAN (VOTER ACTIVATION NETWORK) FEE	1,000.00
4/3/08	ID# CK# ₁₁₂₇	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	E. GRAND AVE.	
4/3/08	ID# CK# ₁₁₂₈	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	1,000 CAMPAIGN POSTCARDS	95.40
	ID#			
	CK#			
	ID#			
	CK#			
		1	SUB-TOTAL	\$ 4 594 22

SUB-TOTAL \$ 4,584.33

TOTAL (if last page of this schedule)

\$ 4,584.33

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		of		